

Procter & Gamble - I.P. Division

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Cindy Lukas (Signature)

FROM: Cindy Lukas

Fax No. 513-622-3300

Phone No. 513-622-1692

Listed below are the item(s) being submitted
with

this Certificate of Transmission:**

- 1) Notice of Appeal (2 pgs.)
- 2) Fee Transmittal (1 pg.)

Inventor(s): Allan Lepine

S.N.: 09/163,778

Filed: September 30, 1998

Docket No.: P116

Number of Pages Including this Page: 4

Comments:

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No. : 09/163,778
Applicant(s) : Allan Lepine
Filed : September 30, 1998
Title : Canine Milk Substitute
TC/A.U. : 1761
Examiner : Chhaya D. Sayala
Conf. No. : 5876
Docket No. : P116
Customer No. : 27752

NOTICE OF APPEAL FROM THE EXAMINER TO
THE BOARD OF PATENT APPEALS AND INTERFERENCES

Commissioner for Patents

P. O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner. The fee for this Notice of Appeal is \$500 (37 CFR 41.20(b)(1)).

The Director is hereby authorized to charge the above fees, or any additional fees that may be required, or credit any overpayment to Deposit Account No. 16-2480 in the name of The Procter & Gamble Company. An additional copy of this Notice is enclosed for that purpose.

I am:

an attorney or agent of record.

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11/25/2005 ZJUHAR1

[X] authorized to act on behalf of the assignee of record of the entire interest, The Procter & Gamble Company. See 37 CFR 3.71. The assignment was recorded on November 20, 1998 at reel 9595 frame 0600.

Respectfully submitted,

THE PROCTER & GAMBLE COMPANY

Cynthia L. Clay
Signature

Cynthia L. Clay

Typed or printed name

Registration No. 54,930

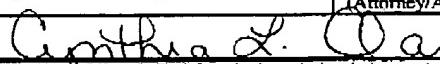
(513) 622-0291

Date: November 23, 2005
Customer No. 27752

P118Appnot.doc

FEE TRANSMITTAL for FY 2005 Patent fees are subject to annual revision. Effective December 8, 2004		Complete if Known	
		Application Number	09/163,778
		Confirmation Number	5876
		Filing Date	September 30, 1998
		First Named Inventor	Allan Lepine RECEIVED
		Examiner Name	Chhaya D. Sayala CENTRAL FAX CENTER
		Art Unit	1761
TOTAL AMOUNT OF PAYMENT (\$) 500		Attorney Docket No.	NOV 23 2005 P116

METHOD OF PAYMENT			FEES CALCULATION (continued)																																																				
<p>1. [X] The Director is hereby authorized to charge indicated fees submitted on this form, credit any over payments, and charge any additional fee(s) during the pendency of this application to:</p> <p>Deposit Account Number: 16-2480 Deposit Account Name: The Procter & Gamble Company</p>			<p>5. ADDITIONAL FEES</p> <table> <thead> <tr> <th><u>Fee Description</u></th> <th><u>Fee Paid</u></th> </tr> </thead> <tbody> <tr> <td>Extension for reply within 1st month</td> <td>(\$120) <input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 2nd month</td> <td>(\$450) <input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 3rd month</td> <td>(\$1,020) <input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 4th month</td> <td>(\$1,590) <input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 5th month</td> <td>(\$2,160) <input type="checkbox"/></td> </tr> <tr> <td>Information Disclosure Statement fee</td> <td>(\$180) <input type="checkbox"/></td> </tr> <tr> <td>37 CFR 1.16(f) Late Oath/Declaration (nonprovisional)</td> <td>(\$130) <input type="checkbox"/></td> </tr> <tr> <td>37 CFR 1.17(g) Surcharge - Late provisional filing fee or cover sheet</td> <td>(\$50) <input type="checkbox"/></td> </tr> <tr> <td>Non-English specification</td> <td>(\$130) <input type="checkbox"/></td> </tr> <tr> <td>Notice of Appeal</td> <td>(\$500) <input checked="" type="checkbox"/></td> </tr> <tr> <td>Filing a brief in support of an appeal</td> <td>(\$500) <input type="checkbox"/></td> </tr> <tr> <td>Request for oral hearing</td> <td>(\$1,000) <input type="checkbox"/></td> </tr> <tr> <td>Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)</td> <td>(\$1,370) <input type="checkbox"/></td> </tr> <tr> <td>Other: _____</td> <td><input type="checkbox"/></td> </tr> </tbody> </table>		<u>Fee Description</u>	<u>Fee Paid</u>	Extension for reply within 1 st month	(\$120) <input type="checkbox"/>	Extension for reply within 2 nd month	(\$450) <input type="checkbox"/>	Extension for reply within 3 rd month	(\$1,020) <input type="checkbox"/>	Extension for reply within 4 th month	(\$1,590) <input type="checkbox"/>	Extension for reply within 5 th month	(\$2,160) <input type="checkbox"/>	Information Disclosure Statement fee	(\$180) <input type="checkbox"/>	37 CFR 1.16(f) Late Oath/Declaration (nonprovisional)	(\$130) <input type="checkbox"/>	37 CFR 1.17(g) Surcharge - Late provisional filing fee or cover sheet	(\$50) <input type="checkbox"/>	Non-English specification	(\$130) <input type="checkbox"/>	Notice of Appeal	(\$500) <input checked="" type="checkbox"/>	Filing a brief in support of an appeal	(\$500) <input type="checkbox"/>	Request for oral hearing	(\$1,000) <input type="checkbox"/>	Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)	(\$1,370) <input type="checkbox"/>	Other: _____	<input type="checkbox"/>																					
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<p>2. BASIC FILING FEE - Large Entity</p> <table> <thead> <tr> <th><u>FILING FEE</u></th> <th><u>SEARCH FEE</u></th> <th><u>EXAMINATION FEE</u></th> </tr> </thead> <tbody> <tr> <td><u>Application Type</u></td> <td></td> <td><u>Fee Paid</u></td> </tr> <tr> <td>Utility</td> <td>(\$300)</td> <td>(\$500)</td> </tr> <tr> <td></td> <td></td> <td>(\$200)</td> </tr> <tr> <td></td> <td></td> <td>(Total = \$1000) <input type="checkbox"/></td> </tr> <tr> <td>Design</td> <td>(\$200)</td> <td>(\$100)</td> </tr> <tr> <td></td> <td></td> <td>(\$130)</td> </tr> <tr> <td></td> <td></td> <td>(Total = \$430) <input type="checkbox"/></td> </tr> <tr> <td>Reissue</td> <td>(\$300)</td> <td>(\$500)</td> </tr> <tr> <td></td> <td></td> <td>(\$600)</td> </tr> <tr> <td></td> <td></td> <td>(Total = \$1400) <input type="checkbox"/></td> </tr> <tr> <td>Provisional filing fee</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td>(Total = \$200) <input type="checkbox"/></td> </tr> </tbody> </table>			<u>FILING FEE</u>	<u>SEARCH FEE</u>	<u>EXAMINATION FEE</u>	<u>Application Type</u>		<u>Fee Paid</u>	Utility	(\$300)	(\$500)			(\$200)			(Total = \$1000) <input type="checkbox"/>	Design	(\$200)	(\$100)			(\$130)			(Total = \$430) <input type="checkbox"/>	Reissue	(\$300)	(\$500)			(\$600)			(Total = \$1400) <input type="checkbox"/>	Provisional filing fee					(Total = \$200) <input type="checkbox"/>	<p>3. APPLICATION SIZE FEE:</p> <p>Sheets of Spec and Drawings <input type="checkbox"/> (\$250 for each 50 sheets in excess of 100, except for sequence and program listings)</p> <p>SUBTOTAL (2)+(3) (\$) [0]</p> <p>4. EXTRA CLAIM FEES FOR UTILITY AND REISSUE:</p> <table> <thead> <tr> <th><u>Extra Claims</u></th> <th><u>Fee from Below</u></th> <th><u>Fee Paid</u></th> </tr> </thead> <tbody> <tr> <td>Total Claims <input type="checkbox"/> - 20** = <input type="checkbox"/> x <input type="checkbox"/> = <input type="checkbox"/></td> <td></td> <td></td> </tr> <tr> <td>Independent Claims <input type="checkbox"/> - 3** = <input type="checkbox"/> x <input type="checkbox"/> = <input type="checkbox"/></td> <td></td> <td></td> </tr> <tr> <td>Multiple Dependent claims: <input type="checkbox"/> = <input type="checkbox"/></td> <td></td> <td></td> </tr> </tbody> </table> <p>** or number previously paid, if greater; For Reissues, see below</p> <p>Fee Description</p> <p>Claims in excess of 20 (\$50 per claim) Independent claims in excess of 3 (\$200 per claim) Multiple dependent claim, if not paid (\$360) **Reissue: each independent claim over 3 and more than in the original patent (\$200 per claim) **Reissue claims: each claim over 20 and more than original patent (\$50 per claim)</p> <p>SUBTOTAL (4) (\$) [0]</p> <p>SUBTOTAL(5) (\$) [500]</p>		<u>Extra Claims</u>	<u>Fee from Below</u>	<u>Fee Paid</u>	Total Claims <input type="checkbox"/> - 20** = <input type="checkbox"/> x <input type="checkbox"/> = <input type="checkbox"/>			Independent Claims <input type="checkbox"/> - 3** = <input type="checkbox"/> x <input type="checkbox"/> = <input type="checkbox"/>			Multiple Dependent claims: <input type="checkbox"/> = <input type="checkbox"/>		
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SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Cynthia L. Clay	Registration No. (Attorney/Agent)	54,930	Telephone (513) 622-0291
Signature				Date 11-23-05

+ This collection of information is required by 35 CFR 1.17. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 10 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon individual case. Any comments on the amount of time you are required to complete this form, and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT